

Lane

BILLINGE

Urban District Council.

Annual Report of Medical Officer of Health for 1910.

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to submit to you my report on the health and sanitary condition of the Urban District of Billinge for the year 1910.

POPULATION.—The first matter to be dealt with is the estimation of the number of persons assumed to have been living in the district at the middle of the year, which number may be taken as representing the mean population for the year, and which may form the basis for the calculation of the Birth and Death Rates.

This mean population may be estimated from the following data:—

(1) Natural Increase.

Since the census of 1901, when the population was 4,232, the births calculated to the middle of 1910 have exceeded the deaths by 60½; therefore, this number added to 4,232 would give a population of 4,836.

(2) Assumption of the continued uniform rate of increase.

If the population be assumed to have increased at the rate calculated from 1891—1901, the population by the middle of the year 1910 would have become 4,461.

Census population, 1891	...	...	...	3,996
Census population, 1901	...	...	...	4,232

(3) Calculation based on the ascertained number of inhabited houses at the middle of the year.

From the census returns the average number of persons per house was 5.18.

If this average number of persons per house has remained unaltered, the population in the middle of the year 1910 will be 4,889.

	Billinge-Chapel-End.	Billinge-Higher-End,	Winstanley.
Occupied Houses	401	425	118

(4) From the birth-rate, which remains fairly constant for any district.

The number of births in Billinge for the year 1910 was 148, this number multiplied by 1,000 and divided by 30.20, which is the average birth-rate for the last ten years, gives a population of 4,900.

In view of these considerations, I am of opinion that the number 4,750 may be reasonably taken for the estimate of the population of Billinge as existing in the middle of the year 1910.

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Since the number of inhabited houses in Billinge Chapel End has remained practically stationary, this increase of 100 over the estimated population for 1909 must be allocated between the districts of Billinge Higher End and Winstanley, where the number of inhabited houses have increased by 22 and 14 respectively.

This allocation of increase gives the population of the separate districts the following:—

	Population.			
Billinge Chapel End	2,030
Billinge Higher End	2,090
Winstanley	630
Total				4,750

The area of Billinge is 4,591 acres, and the density of the population 1.03 per acre.

The number of deaths registered as having occurred within the district of Billinge during the year 1910 was 112.

However, before calculating the death-rate, correction has to be made in the total number of deaths regarding such deaths as are known to have occurred in public institutions within or outside the district.

Of the 112 deaths, 49 were those of non-residents, which occurred in the Workhouse Infirmary—a public institution within the district—and which are to be excluded, while to this number no addition is necessary, as no death is recorded as having occurred to a resident outside the district. The corrected number of deaths, therefore, is 112—49, *i.e.*, 63, of which 31 were males, and 32 females.

The death-rate for the year 1910 equals 13.26 per 1,000 living, against 12.04 for 1909, and 15.36 for the decennial period 1900-1909. The death-rate for the whole of England and Wales for the year 1909 was 14.5, against 14.7 for the previous year. Of the 63 deaths, 17 occurred in infants under one year of age, 4 in children one year and under 5 years, 27 in persons 5 years and under 65 years, and the remaining deaths, which total 15, over the 65 years age-period. The deaths of infants under one year of age numbered 17, equal to annual infantile death-rate of 114.8 per 1,000 registered births. This infant death-rate is much below the average for the decennium 1900-1909, when 147 was recorded, and is only slightly in excess of 109, the infant death-rate for England and Wales during 1909.

Of the 17 deaths, Wasting Diseases contributed 8, Diarrhoeal Diseases 5, and other causes 4.

BIRTHS.—During the year 1910 there were registered within the district 148 births, 81 males and 67 females, against 74 males and 65 females, and a total of 139 registered for 1909.

The birth-rate for the district of Billinge is 31.15, as compared with 25.6 for England and Wales for 1909.

The number of births and the corresponding birth-rates of the separate localities in the district are shown in the following table:—

BIRTHS.				
	Males.	Females.	Birth-rate.	
Billinge Chapel End	...	41	38	38.90
Billinge Higher End	...	36	27	30.14
Winstanley	...	4	2	9.52

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INFECTIOUS DISEASE.—During the year there were notified 42 cases of infectious disease, as against 27 for the previous year. Of these cases two were not compulsorily notifiable.

The following table shows the distribution of these diseases:—

	Billinge C.E.	Billinge H.E.	Winstanley.
Scarlet Fever	11	14	7
Enteric Fever	5	0	0
Erysipelas •	0	2	0
Diphtheria	0	1	0
Pulmonary Tuberculosis	2	0	0

The seven principal Epidemic Diseases, namely, Smallpox, Scarlet Fever, Diphtheria and Membranous Croup, Whooping Cough, Fever (comprising Enteric, Typus, and Continued Fever), and Diarrhœa, gave rise to 6 deaths, or 9.52 per cent. of the total deaths from all causes.

The epidemic death-rate equals 1.26, which is much higher than the rates recorded for the two previous years, and also slightly in excess of that for England and Wales for 1909, when 1.12 was recorded.

SCARLET FEVER.—Thirty-two cases of this disease have been notified during the year, as against twenty-two cases for 1909, and three cases for the previous year. Of these cases one terminated fatally, giving a case mortality of 3.12 per cent., which may be considered low. It is important to note that this death occurred in a male child under two years of age, thus giving support to the view that age and sex have a marked influence on the fatality of this disease. Although this disease has not been so prevalent for many years, the attacks in some cases were so mild that they might have been overlooked had not other members of the same family contracted the disease in a more severe form. The whole of these cases were distributed almost equally among the three districts, and with the exception of the period from June to September, each month contributed its quota. Since some of these cases only developed the throat symptoms of the disease, which are usually only recognisable by a medical man, it is quite obvious that many such cases are often allowed to escape treatment and be a source of danger and of infection to the general community. In my opinion these mild unrecognised cases are mostly confined to the adult population, who have early in life suffered from one or more attacks, and are rendered thereby almost immune. If more importance were attached to the disinfection of the mouth, fauces, and nasal cavities, not only of those infected, but also of those, and particularly the adults, who have been in contact with the disease, much benefit might accrue from such precautionary measures, for the discharges from these cavities undoubtedly are responsible in great measure for the propagation of this disease.

ENTERIC FEVER.—Five cases of this disease, with one death, were reported during the year in Billinge Chapel End. The whole of the cases were confined to one house, which probably received infection through the common house fly, as this particular house was infested with these insects when the outbreak first appeared. Since the notifications of this disease covered a period of four weeks, and each case was separated by an interval of a few days from the succeeding one, it is somewhat certain that infection was conveyed from case to case, and probably in the manner mentioned. To combat the disease and to prevent further spread of this malady, the house, which was fortunately isolated, was converted into a temporary hospital, and left in the care of two responsible women, who carried out my instructions in a very efficient manner, so that no further spread of infection was reported. Moreover, as I found the drainage connected with this building not very satisfactory, instructions were given to carry out certain alterations, which would improve the sanitary surroundings of this infected area.

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ERYSIPELAS.—Two mild cases of this disease were reported in Billinge Higher End, on widely separated dates. Both cases occurred in persons of different sex, and at ages when this disease usually runs a mild form, *i.e.*, at the intermediate age-periods of life. The diseases, and also the causes, which are at times responsible for an attack, were investigated, and apart from faulty drainage, which was found in one case, no other source of infection could be traced.

DIPHTHERIA.—One case of this disease, which terminated fatally, was notified in Billinge Higher End during the year.

This case occurred in a child, at an age when the mortality of this disease is usually at its maximum, which is about the fourth year of life. On inquiry, no source of infection could be traced either at the infected house or in the immediate neighbourhood of the case to account for the outbreak.

Antitoxin is supplied gratuitously by the Council, but no demand has been made by Medical Practitioners for its supply.

DIARRHŒA.—Three deaths were registered from this disease during the months of August and September, in infants artificially fed, and under one year of age. The whole of the deaths were confined to a localised area in Billinge Chapel End, where the disease almost assumed an epidemic form during the period herein mentioned. To combat the prevalency of this specific affection, all the sanitary conveniences in the infected area were attended to and thoroughly disinfected, and handbills indicating the dangers resulting from the common house fly were circulated throughout the district, as these carriers of disease were at that period particularly abundant in the infected houses.

PHTHISIS (PULMONARY TUBERCULOSIS) was credited with two deaths, equal to a percentage to total deaths from all causes of 3.17. The death-rate from this disease equals .42 per 1,000, as compared with .43 recorded for last year, and .63, which is the mean for the decennial period, 1900-1909.

RESPIRATORY DISEASES, comprising Bronchitis, Pneumonia, and Pleurisy, contributed 8 deaths, or 12.69 of the total mortality. The respiratory death-rates per 1,000 of the population for 1910 and 1909 are 1.68 and 1.72 respectively, and the mean for the corresponding years 1900-1909 is 2.88. These deaths, which were distributed over several age-periods, did not affect any particular season, but occurred at varying intervals throughout the entire year.

DEATHS UNCERTIFIED BY REGISTERED MEDICAL PRACTITIONERS.—Three deaths, two in infants under one week, and the remaining death in a person over 65 years of age, were returned as “uncertified,” while no inquest has been held during the year.

SANITARY INSPECTION.—The Sanitary Inspector and myself have made “systemic inspections” of the several districts during the year. In Billinge Chapel End—a district in which old property preponderates—much work has been done by owners to render this class of property reasonably fit for human habitation. The dearth of house accommodation in Billinge Chapel End, which was complained of in my last annual report, has been overcome by the construction of several houses to replace those which had fallen into disuse, and the removal of a few families either into the other two districts, where building operations have been slightly in excess of the present demand, or into adjoining districts, which apparently claim preference by reason of their proximity to the coal mines, in which the greater part of the population is employed. Now that the Housing, Town Planning, etc., Act, 1909, has been made law, the powers and duties of Local Authorities in regard to the important question of the Housing of the Working Classes have been increased, and much of the inconvenience which has existed in the past in dealing with this class of property will now be overcome.

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DRAINS, SEWERS, AND SEWAGE DISPOSAL.—All faulty house drains, waste pipes, and gully traps have received prompt attention, and the sewers have also been periodically flushed out. No complaint has arisen during the year with regard to their ventilation, and apart from the difficulty at Gantley Lane, all new property has been connected with existing sewers. The scheme which was proposed last year respecting the receiving of the sewage from this area has now been abandoned, as the intended sewage field was found to be in too close proximity to the present building sites. To meet the requirements of this district, the Council have now under consideration the purchase of an Automatic Sewage Lift and the laying of a deep sewer to convey the sewage which is at present received into cesspools from this area. The Sewer at the Orrell Brickworks—which is at the outfall to the adjoining sewage field—has received attention, owing to a leakage arising from a subsidence, which is by no means an uncommon occurrence in this locality owing to surface mines. The several Sewage Farms have been visited during the year, and the treatments by intermittent downward filtration and broad irrigation are satisfactorily carried out, as no complaint has arisen with regard to the condition of their effluents.

CLEANSING AND SCAVENGING.—Much work has been done during the year in the way of channelling, kerbing, and the fixing of grids at suitable places to receive the surface water from the roads. At Upholland Road the footpath and roadway have been widened and put in good repair, while near the entrance to the Union Infirmary Hospital the road has been slightly lowered in consequence of the old roadway at this particular spot interfering with efficient surface drainage. With the exception of a few scattered lengths of pavement, the whole of the roads are macadamised, and repairs are carried out efficiently.

The trouble which was occasioned last year in the removal of nightsoil has now been overcome, by the Council undertaking the whole of the work, after attempts were first made to divide the district into areas and to contract for its removal.

Twenty-six notices have been served during the year to abate the following nuisances:—

Defective Sanitary Conveniences	...	...	11
Defective Drains	...	...	6
Insanitary Cowsheds	...	...	4
Defective Spouting	...	...	2
Keeping of Poultry	...	...	1
Insanitary Urinal	...	...	1
Overcrowding	...	...	1

Of the twenty-six notices, seventeen have been complied with, while the others, which are principally those of insanitary conveniences, are in the course of completion. I am pleased to say that the Council have during the year shown their determination to have urgent nuisances abated without delay, and also not to wait indefinitely for the completion of others of a less serious character, as was often the case in former years, when owners of property were repeatedly served with notices of abatement before any real efforts were made by them to abate the nuisances.

DISINFECTION.—This has been carried out as in the past, by means of chemical agents, viz., Sanitas Compounds and Izal Fluid. Fumigation of rooms is now solely carried out by "Formaldehyde" Tablets, which seem to give satisfactory results. I have advised the Council to supply "Formanint" Tablets as an appropriate prophylactic in times of Diphtheria and Scarlet Fever, as I think more attention should be given to the disinfection of the mouth cavity and tonsils, not only of the sick, but also of their attendants and those residing in the infected house.

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The cottage at Brownlow has been visited, and is in readiness for any emergency, which I am pleased to report has not presented itself during the year.

ELEMENTARY SCHOOLS.—There are two public elementary schools in the district, both of which are situated in Billinge Chapel End, and named the Billinge Church and St. Mary's Schools, Birchley. The Medical Inspection of children in these schools is under the supervision of the County Medical Officer of Health, who by the aid of assistants carries out this important work for the Local Education Authority, which is in County areas, the County Council. In my capacity as Medical Officer of Health of Billinge, I have visited these schools and inspected the sanitation, heating, lighting, ventilation, and water supply, and have also asked the teachers to note the early symptoms of disease of a febrile nature, with a view of retarding the spread of infectious disease. At Billinge Church Schools the system of heating by low pressure pipes has been installed, while attention to improved lighting has been given at both schools. The sanitation, ventilation, water supply, and general cleanliness of these buildings and surroundings are satisfactory; also much credit is due to parents for the personal cleanliness of the children, which is so marked at both places.

DAIRIES, COWSHEDS, AND MILKSHOPS.—These buildings have received special attention during the year, and are now in a much more satisfactory condition than in former years. The faulty drainage and treatment of the sewage have been remedied in two cases, one of which was particularly dangerous, as the sewage was found to discharge into a stream. In some cases, owing to the isolated position of these buildings, the sewage is discharged into cesspools with overflows for treatment; also in a few cases the water supply is obtained from surface wells in their immediate vicinity. As soon as the New Water Scheme is complete, few, if any, will be without the Council's water, which is so highly important in a trade of this character, where the risk from contamination is so great from the cesspool treatment of the sewage. For several years the milk trade has been gradually passing into fewer hands, which I think must have beneficial effects. This change will now allow of more frequent inspection, which I presume will be less needful, as those engaged will acquire a more intimate knowledge of both the production and the care required in the handling and distribution of the milk.

Many samples of milk have been submitted to the County Analyst for analysis, but all have given a satisfactory result.

SLAUGHTER HOUSES.—There are two registered in the district, one in Billinge Higher End, and the other in Winstanley. Both places have been visited from time to time, and found to be kept in a very sanitary condition, no breach of the Bye-Laws or Sanitary Acts having been recorded during the year.

FACTORY AND WORKSHOPS ACT, 1901.—The workshops and factories have been visited, and found satisfactory. No case of infectious disease has been notified from these premises, nor have any particulars been received from any other Council as to home-work being sent into the district. No complaint respecting these premises has arisen during the year from either the District Council or the District Factory Inspector. Apart from the bakehouses, the whole of the workshops are engaged in the making of wearing apparel, which cannot be considered great from the number of persons so engaged on the register. In a few cases this class of work is carried on at such irregular intervals, and does not furnish the principal means of living to the family, that registration is not requisite under the Act.

WATER SUPPLY.—Several lengths of new water mains have been laid in various parts of the district to supplement the supply, which has been found somewhat intermittent in some areas

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from the faulty condition of the old mains. This is part of the New Water Scheme which the Council have now in hand. A pumping station has been erected at Shaley Brow to pump the overflow from this catchment area into the Service Reservoir, which is intended to supply the districts of Billinge Higher End and Winstanley.

The supply, apart from interference in its distribution, has been plentiful during the year, and the deposit which was complained of in my last Annual Report, is no longer to be found, so that a good quality of water is now supplied to the consumer.

Death-rate	...	...	...	...	13.26
Birth-rate	...	...	...	...	31.15
Zymotic Death-rate	...	...	...	...	1.26

I am,

Mr. Chairman and Gentlemen,

Your obedient Servant,

R. O. MATHER, M.D., D.P.H.

Medical Officer of Health.

February 24th, 1911.

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TABLE I.
VITAL STATISTICS OF WHOLE DISTRICT DURING 1910 AND
PREVIOUS YEARS.

YEAR.	Population estimated to Middle of each Year.	BIRTHS		TOTAL DEATHS REGISTERED IN THE DISTRICT.				Deaths of Residents registered in Public Institutions beyond District.	NETT DEATH AT ALL AGES BELONGING TO THE DISTRICT.	
		Number.	Rate.	Under 1 year of age.	Rate per 1,000 Births registered.	At all ages			Number.	Rate
1900	4250	128	30.11	28	218	73	17.17	2	75	17.64
1901	4250	135	31.76	28	207	70	16.47	2	72	16.94
1902	4250	120	28.23	20	166	76	18.11	2	78	18.35
1903	4300	148	34.41	19	128	77	17.90	0	77	17.90
1904	4350	116	26.66	24	206	67	15.40	3	70	16.09
1905	4500	141	31.33	16	113	58	12.88	1	59	13.11
1906	4500	125	27.77	13	104	60	13.30	3	63	14.00
1907	4500	139	30.88	12	86	43	9.55	3	46	10.22
1908	4600	143	31.08	21	146	77	16.73	3	80	17.39
1909	4650	139	29.89	14	101	52	11.18	4	56	12.04
Averages for years 1900—1909	4415.0	133.4	30.21	19.5	147.5	65.3	14.86	2.3	67.6	15.37
1910	4750	148	31.15	17	114.8	112	23.6	0	63	13.26

Deaths of Non-Residents registered in Public Institutions in the District :—49.

Area of District in acres (exclusive of area covered by water), 4,591.

Total population at all ages, 4,232 at census of 1901.

Number of inhabited houses 817

Average number of persons per house, 5.18.,

Institutions within the District receiving sick and infirm persons from outside the District : Wigan Union Infirmary.

Is the Union Workhouse within the District ? No.

TABLE II.
VITAL STATISTICS OF SEPARATE LOCALITIES IN 1910 AND PREVIOUS YEARS.

NAMES OF LOCALITIES.		BILLINGE-CHAPEL-END.				BILLINGE-HIGHER-END.				WINSTANLEY.			
YEAR.		Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population estimated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
1900	...	1990	69	36	15	1700	45	33	13	560	14	6	0
1901	...	2068	69	33	15	1600	58	29	13	564	8	8	0
1902	...	2072	61	41	10	1618	52	27	8	560	7	10	3
1903	...	2090	76	32	7	1650	61	32	12	560	11	13	0
1904	...	2100	58	31	10	1700	48	33	11	550	10	6	3
1905	...	2140	67	29	8	1800	62	25	6	560	12	5	2
1906	...	1968	61	33	8	1968	54	25	5	564	10	5	0
1907	...	1952	68	26	7	1968	59	14	5	580	12	6	0
1908	...	2010	74	43	13	2010	59	28	7	580	10	9	1
1909	...	2030	69	36	8	2030	58	18	5	590	12	2	1
Averages of Years 1900 to 1909.		2042.0	67.2	34.0	10.1	1804.4	55.6	26.4	8.5	566.8	10.6	7.0	1.0
1910	...	2030	79	34	12	2090	63	25	5	630	6	4	0

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TABLE 3.—CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1910.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT							TOTAL CASES NOTIFIED IN EACH LOCALITY.			NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.		
	At Ages—Years.							Billinge- Chapel- End.	Billinge- Higher- End.	Winstanley.	Billinge- Chapel- End.	Billinge- Higher- End.	Winstanley.
	At all Ages.	Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwards.						
Diphtheria (including Membranous Croup)	1	0	0	1	0	0	0	0	1	0	0	0	0
Erysipelas	2	0	0	0	1	1	0	0	2	0	0	0	0
Scarlet Fever	32	0	11	18	1	2	0	11	14	7	0	0	0
Enteric Fever	5	0	0	0	2	3	0	5	0	0	0	0	0
Pulmonary Tuberculosis...	2	0	0	0	0	2	0	2	0	0	0	0	0
Totals	42	0	11	19	4	8	0	18	17	7	0	0	0

Isolation Hospital.—Brownlow Cottage, Billinge. Total Available Beds.—4.

Number of Diseases that can be concurrently treated.—One.

TABLE 4.—CAUSES OF, AND AGES AT, DEATH DURING YEAR 1910.

CAUSES OF DEATH.	DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES							DEATHS IN LOCALITIES AT ALL AGES.			Total Deaths whether of 'Residents' or 'Non- Residents' in Public Institutions in the District.
	All ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Billinge- Chapel- End.	Billinge- Higher- End.	Win- stanley.	
Scarlet Fever	1	0	1	0	0	0	0	0	1	0	0
Diphtheria (including Membranous Croup)	1	0	0	1	0	0	0	0	1	0	0
Enteric Fever	1	0	0	0	1	0	0	1	0	0	0
Diarrhoea	3	3	0	0	0	0	0	3	0	0	0
Enteritis	3	2	1	0	0	0	0	2	1	0	0
Phthisis, P'lmonary Tuberculosis	3	0	0	0	0	3	0	2	0	1	6
Other Tuberculous diseases	2	0	1	1	0	0	0	1	0	1	1
Cancer, Malignant Disease	4	0	0	0	0	2	2	2	1	1	2
Bronchitis	6	2	0	0	0	2	2	3	3	0	10
Pneumonia	2	0	0	0	0	0	2	0	2	0	3
Premature Birth	3	3	0	0	0	0	0	3	0	0	0
Heart Diseases	8	0	0	1	1	4	2	5	3	0	10
Accidents	1	0	0	0	0	1	0	1	0	0	1
All other causes	25	7	2	1	2	6	7	11	13	1	16
All causes...	63	17	5	4	4	18	15	34	25	4	49

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TABLE V.
 INFANTILE MORTALITY DURING THE YEAR 1910.
 Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.				Under 1 Week.	1-2 Weeks	3-4 Weeks	Total under 1 month.	1-2 Months.	4-5 Months.	5-6 Months.	6-7 Months.	8-9 Months.	9-10 Months.	10-11 Months.	Total Deaths under One Year.
All Causes—															
Certified	...	...	...	1	2	1	4	2	2	3	1	1	1	1	15
Uncertified	..	...	...	2	0	0	2	0	0	0	0	0	0	0	2
Common Infectious Diseases—															
Small-pox	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Chicken-pox	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Measles	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria : Croup	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Whooping Cough	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Diarrhœal Diseases—															
Diarrhœa, all forms	..	...	...	0	0	0	0	0	1	1	0	1	0	0	3
Enteritis, Muco-enteritis, Gastro-enteritis	...	...	...	0	0	0	0	0	1	1	0	0	0	0	2
Gastritis, Gastro-intestinal Catarrh	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Wasting Diseases—															
Premature Birth	...	...	...	1	1	1	3	0	0	0	0	0	0	0	3
Congenital Defects	..	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Injury at Birth	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Want of Breast-milk	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Atrophy, Debility, Marasmus	...	...	...	0	1	0	1	2	0	1	0	0	0	0	4
Tuberculous Diseases—															
Tuberculous Meningitis	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Tuberculous Peritonitis : Tabes Mesenterica	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Other Tuberculous Diseases	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Other Causes:—															
Erysipelas	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Syphilis	..	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Rickets	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Meningitis (not Tuberculous)	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Convulsions	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Bronchitis	...	...	...	0	0	0	0	0	0	0	0	0	1	1	2
Laryngitis	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Pneumonia	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Suffocation, overlaying	...	...	...	0	0	0	0	0	0	0	0	0	0	0	0
Other Causes	...	...	...	2	0	0	2	0	0	0	1	0	0	0	3
				3	2	1	6	2	2	3	1	1	1	1	17

Population (Estimated to middle of 1910 ; 4,750.

Births in the Year { Legitimate 140
 { Illegitimate 8

Deaths in the year of legitimate infants, 15 ; illegitimate infants, 2.

Deaths from all Causes at all Ages 63

14TH MARCH, 1911.

ANNUAL REPORT OF MEDICAL OFFICER OF HEALTH, FOR THE YEAR 1910, FOR THE
URBAN DISTRICT OF BILLINGE,

ON THE ADMINISTRATION OF THE FACTORY AND WORKSHOP ACT, 1901, IN CONNECTION WITH
FACORIES, WORKSHOPS, LAUNDRIES, WORKPLACES, AND HOMEWORK.

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Factories (Including Factory Laundries) ...	4	None	None
Workshops (Including Workshop Laundries)..	14	—	—
Total	18	—	—

2.—DEFECTS FOUND.—None.

3.—HOME WORK.—None.

4.—REGISTERED WORKSHOPS.

								Number
Workshops on the Register (S.131) at the end of the year.								
Dressmakers	...	...	...	...	...	...	...	6
Bootmaker	...	...	...	...	...	...	...	1
Clog Makers	...	...	...	...	...	...	...	2
Bakehouses	...	...	...	...	...	...	...	4
Tailors	...	...	...	...	...	...	...	1
Total number of workshops on Register	...	...	...	...	...	...	...	14

5.—OTHER MATTERS.—None.

